

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

12677	83
OMB AF	PROVAL
OMB Number	: 3235-0076
Expires:	
Estimated ave	erage burden
hours per rest	onse16.00

SEC USE ONLY						
Prefix	Serial					
DATE REC	EIVED					
1	1					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Brookfield Atlantic Global Technology Outreach	
Filing Under (Check box(es) that apply): Rule 504 PRule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE
A. BASIC IDENTIFICATION DATA	for second second
1. Enter the information requested about the issuer	// occ 0 o 2005
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Brookfield Atlantic Corporation	25.00 8 000
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2 International Place Boston , Massachusetts 02110	(617) 426-8066
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
2776 South Arlington Mill Street Ste 503 Arlington , Virginia 22206 Brief Description of Business	(703)541-5550
engages in the research, design, development, manufacture, integration, operation, and surservices in the United States and internationally	pport of technology systems, products, and
Type of Business Organization corporation limited partnership, already formed business trust limited partnership, to be formed	please specify): PROCESSED
	OCT 0 6 2005
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	HOMSON FINANCIAL

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Mof 9

10 meter	4.	AND THE TRANSPORT OF THE PROPERTY OF THE PROPE	ENTIFICATI	ON DATA				
		•						
Each beneficial own	ner having the power	er to vote or dispose, or di	rect the vote or	disposition o	of, 10%	or more of	faclas	s of equity securities of the issuer
 Each executive offi 	cer and director of	corporate issuers and of	corporate gen	eral and man	aging p	partners of	partne	rship issuers; and
 Each general and m 	anaging partner of	f partnership issuers.						
Enter the information requested for the following: Each permoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers; and Each general and managing partner of partnership issuers; and Each general and managing partner of partnership issuers; and Each general and for partnership issuers; and Check Box(es) that Apply: Promoter								
							<u>.</u>	
		-	ode)					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execut	ive Officer	Z	Director		
	findividual)					. 1 181 - 1		
Business or Residence Addres	ss (Number and	Street, City, State, Zip C	ode)					
945 Concord Street Frami	ngham , Massad	chusetts 01701						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execut	ive Officer	Ø	Director		
	f individual)							
Business or Residence Addres	ss (Number and	Street, City, State, Zip C	ode)		**			
385 Mill Street Mansfield,	Massachuetts (02048						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execut	ive Officer	Z	Director		
Full Name (Last name first, in	f individual)							
Amma King								
Business or Residence Addres	ss (Number and	Street, City, State, Zip C	(ode)					
945 Concord Street Fran	ningham , Mass	achusetts 01701						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execut	ive Officer	Z	Director		
	f individual)							
	•		Code)		•			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execut	ive Officer	Z	Director		
	f individual)							
Business or Residence Addre 35 Marylebone Street Lo		• • • • • • • • • • • • • • • • • • • •	Code)					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execut	ive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)							
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)					

Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	63°6 3					В. П	NFORMATI	ION ABOU	T OFFERI	NG				
Answer also in Appendix, Column 2, if filling under ULOE. 2. What is the minimum investment that will be accepted from any individual? 5. Syes No Yes No Y	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?													
3. Does the offering permit joint ownership of a single unit? 4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer engineered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer engineered with the SEC and/or with a state or states, list the name first, if individual) Not- Applicable States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [All States and Section of the				,			•				-		Bassai	-
3. Does the offering permit joint ownership of a single unit?	2.	. What is the minimum investment that will be accepted from any individual?									\$			
4. Eater the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation on purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer, country as front the information for that broker or dealer, you may set front the information for that broker or dealer on states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set front the information for that broker or dealer only. Full Name (Last name first, if individual) Note: Applicable Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ALL AK AZ AR CA CO CT DE DC FL GA HI ID MM MI NE NO NI														
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer resistered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, if individual) Not-Applicable Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											R			
Not-Applicable Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)				first, if ind	ividual)							-		
Name of Associated Broker or Dealer				Address (N	lumber and	Street Ci	tv State 7	in Code)			 			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		5111 6 55 61 7		71441035 (1	dinoor une	a Baroot, C	ity, State, 2	np code)						
All States All States All AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY IA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR WI WI WI WY PR WI WI WI WI WI WI WI W	Na	me of Ass	ociated Bi	oker or De	aler									
AL AK AZ AR CA CO CT DE DC FL GA HI ID II. IN IA KS KY IA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers		•				
IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		(Check	"All States	or check	individual	States)	•••••				•••••••		☐ Al	l States
IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		AL	ĀK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)											===			MO
Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		RI	SC	[SD]	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)			Last name	first, if ind	ividual)									
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Bu	siness or	Residence	Address (1	Number an	d Street, C	Sity, State, 2	Zip Code)	ν					
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	No	ma of Ass	o sisted D	-alean an Da	-1		-							
(Check "All States" or check individual States)	INA	nie oi Ass	ocialed b	oker or De	aici									
AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA	Sta	ites in Wh	ich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			-			
IIL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All States AL AK AZ AR CA CO CT DE DC FL GA HI ID IIL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA		(Check	"All State:	s" or check	individual	States)							☐ Al	l States
MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)		AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
RI SC SD TN TX UT VA WA WV WI WY PR Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
Full Name (Last name first, if individual) N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
N/A Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA	Fu						[01]		VA	WA]	(<u>vv v</u>)	·	WI	(IK)
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)					ivicadij						,			
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA	Bu	siness or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)						
(Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA	Na	me of Ass	sociated B	roker or De	aler									
AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA	Sta	ates in Wh	ich Persoi	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA		(Check	"All State	s" or check	individua	l States)					•••••		☐ Al	1 States
IL IN IA KS KY LA ME MD MA MI MN MS MO MT NE NV NH NJ NM NY NC ND OH OK OR PA		AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IL	IN	IA										
					-									

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	с 1	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		
	Equity	\$_5,000,000.00	0.00
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	_ \$
	Other (Specify)	\$	\$
	Total	\$_5,000,000.0	0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in thi offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicat the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	•	Aggregate Dollar Amount of Purchases
	Accredited Investors	0	\$
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	Equity	\$_0.00
	Regulation A	·	\$
	Rule 504	·	\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•	
	Transfer Agent's Fees	[\$
	Printing and Engraving Costs		Z \$_100,000.00
	Legal Fees		Z \$ 75,000.00
	Accounting Fees		<u>\$</u> 30,000.00
	Engineering Fees	_	Z \$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 50,000.00
	Other Expenses (identify)		2 \$ 0.00
	Total	_	\$ 255,000.00

Ä,	C. OFFERING PRICE, NUMB	ER OF INVESTORS, EXPENSES AND USE OF	PRO	CEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — C proceeds to the issuer."	Question 4.a. This difference is the "adjusted gros	SS		\$4,745,000.
i.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate an the payments listed must equal the adjusted gross	d		
			Γ	ayments to Officers, Directors, & Affiliates	Payments Others
	Salaries and fees		🗾 \$	840,000.00	S
	Purchase of real estate		. 🗾 \$	300,000.00	\$
	Purchase, rental or leasing and installation of mach and equipment	-			\$
	Construction or leasing of plant buildings and faci	lities	🔽 \$	200,000.00	<u></u> \$
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ne of securities involved in this ts or securities of another			\$
	Repayment of indebtedness		🔽 \$	5,000.00	\$
	Working capital		🔽 \$	2,000,000,1	S
	Other (specify): Investments in dividend and intecompanies cash flow	erest bearing accounts that will sure up the	_ 🗆 \$		<u>\$</u>
			🗾 \$	1,200,000.00	\$
	Column Totals		□ \$	4,745,000.00	0.00 s
	Total Payments Listed (column totals added)		_		45,000.00
		D. FEDERAL SIGNATURE			
ig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accr	undersigned duly authorized person. If this not nish to the U.S. Securities and Exchange Comm	nissio	n, upon writter	
SS	uer (Print or Type)	Signature	Dat	e .	
Br	ookfield Atlantic Corporation	INAUNE Manhame		09/2	7/05
Va	me of Signer (Print or Type)	Title of Signer (Print or Type)			/
1	Wayne Montcomery	Chairman		.	
-6	1.0				

- ATTENTION -